

Project WET Workshop Scheduling Form

*1. Please provide the following information:

Facilitator Name:

Email Address:

Phone Number:

*2. Date and Time of Workshop (two spaces are available in case of a split workshop)

	MM	DD	YYYY	HH	MM	AM/PM
Date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

*3. Location of the workshop?

*4. Please provide contact information for the organization or school sponsoring the workshop.

Name:

Company:

Address:

Address 2:

City/Town:

ZIP:

Email Address:

Phone Number:

*5. Who is the intended audience for this workshop?

*6. Who is providing the K-12 Curriculum and Activity Guides for this workshop?

*7. Who will be ordering the K-12 Curriculum and Activity Guides for this workshop?

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***8. Do you have a copy of the Facilitator Report Form, the Sign-In Sheets and the WET Evaluation form? Please send the originals or a copy of all three to Page Hutchinson upon completion of the workshop. Thanks.**

- ☐ Yes
- ☐ No, please send.

***9. Do you need an electronic copy of a Certificate of Completion for your participants?**

- ☐ Yes
- ☐ No

Feel free to contact me at page.hutchinson@deq.virginia.gov or call me at 804-698-4488. Please send the completed forms to Page Hutchinson, DEQ, 629 E. Main St., Richmond 23219 upon completion of the workshop. Thanks and good luck with your workshop! I certainly appreciate you and your commitment to water education.

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State Coordinator